

CRIMINAL

☒ TRAFFIC ☐ NON-TRAFFIC LEA ORI#: WA0311900

COURT ORI #: WA031031J

CITATION #: 520241566

REPORT #: 15-00750

IN THE ☐ DISTRICT ☒ MUNICIPAL COURT OF
☐ STATE OF WASHINGTON ☐ COUNTY OF

MARYSVILLE MUNICIPAL COURT

☒ CITY/TOWN OF **LAKE STEVENS**

PLAINTIFF VS. NAMED DEFENDANT

DRIVER'S LICENSE NO. **THURSEM246KL** STATE **WA** EXPIRES **05-13-18** PHOTO I.D. MATCHED ☒ YES ☐ NO

ADDRESS **1304 BRUSKRUD RD**

NAME: LAST **THURSTON**

FIRST **EUGENE**

MIDDLE **M**

SFX

CDL ☐ YES ☒ NO

IF NEW ADDRESS ☐ CITY **EVERETT** STATE **WA** ZIP CODE **98208**

EMPLOYER

EMPLOYER LOCATION

DATE OF BIRTH **05-13-76**

RACE **B**

SEX **M**

HEIGHT **5'11"**

WEIGHT **300**

EYES **BRO**

HAIR **BLK**

RESIDENTIAL PHONE NO.

CELL/PAGER PHONE NO.

WORK PHONE NO.

VIOLATION DATE

ON OR ABOUT **03/30/2015 14:43**

INTERPRETER NEEDED ☐

AT LOCATION **SR9**

REF. TRAFFICWAY

M.P. BLOCK # **100**

CITY/COUNTY OF **LAKE STEVENS/SNOHOMISH**

DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND

VEH LIC NO

STATE

EXPIRES

VEH YR

MAKE

MODEL

STYLE

COLOR

TR #1 LIC NO

STATE

EXPIRES

TR YR

TR #2 LIC NO

STATE

EXPIRES

TR YR

OWNER/COMPANY IF OTHER THAN DRIVER

ADDRESS

CITY

STATE

ZIP CODE

ACCIDENT

BAC

COMMERCIAL VEHICLE

YES

16+ PASS

YES

HAZMAT

YES

EXEMPT VEHICLE

FIRE LEA

1. VIOLATION/STATUTE CODE **46.30.040**

DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

2. VIOLATION/STATUTE CODE

☐ DV

3. VIOLATION/STATUTE CODE

☐ DV

4. VIOLATION/STATUTE CODE

☐ DV

5. VIOLATION/STATUTE CODE

☐ DV

MANDATORY COURT APPEARANCE

APPEARANCE DATE

TIME

RELATED #

DATE ISSUED **03-30-15**

☐ TICKET SERVED ON VIOLATOR

☒ TICKET REFERRED TO PROSECUTOR

☐ TICKET SENT TO COURT FOR MAILING

☐ BOOKED

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT:
 OFFICER **N. ADAMS #127**
 # **127**

CHG #	RESPONSE	CHG	DISPOSITION	FINES	SUSPENDED	SUB-TOTAL	FINDING/JUDGMENT DATE	TO SERVE	DAYS
1	G	NG	G NG D	\$	\$	\$		W	DAYS SUSP
2	G	NG	G NG D	\$	\$	\$		CREDITIVE SVOL Y/N	
3	G	NG	G NG D	\$	\$	\$		LIC SVOL DT	
4	G	NG	G NG D	\$	\$	\$		REC NON-EXTENSION OF	
5	G	NG	G NG D	\$	\$	\$		SUSP Y/N	
COMPLAINT/ CITATION ABSTRACT OF JUDGMENT				TOTAL COSTS		\$			

On 03/22/15 at about 1507 hours, (all times approximate) I responded to a collision at Market Pl and SR 9 NE, in the city of Lake Stevens. Reference case # 15-00750.

I asked both parties involved in the accident if they had their driver's license, registration and valid insurance, they both said yes and handed me their documents. I provided the exchange of information and sent them on their way.

On 03/29/15 I received word that Eugene M. Thurston (DOB 05/13/1976), driver of vehicle 1, did not have liability insurance. I called Vern Fonk insurance, which Thurston claimed he had valid insurance with, and confirmed with a Vern Fonk call taker that Thurston had his liability insurance cancelled as of 1/10/3/14.

I wrote Thurston citation 5Z0241566 for providing false evidence of financial responsibility - RCW 46.30.040.

Officer's Report for Citation/Notice of Infraction # 5Z0241566.

The information contained in and attached to this citation/notice of infraction is incorporated by reference into this report.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT ALL STATEMENTS MADE HEREIN ARE TRUE AND ACCURATE AND THAT I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

...NARRATIVE CONTINUES ON NEXT PAGE...

TRAFFIC		WEATHER		STREET		LIGHT	
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP



Signature: N. ADAMS #127 #: 127

Date and Place: 3/30/2015 City/Town of Lake Stevens, County of SNOHOMISH

IN THE ☐ DISTRICT ☒ MUNICIPAL COURT OF MARYSVILLE MUNICIPAL COURT LAKE STEVENS
☐ STATE OF WASHINGTON ☐ COUNTY OF ☒ CITY/TOWN OF

THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON

PLAINTIFF VS. NAMED DEFENDANT

DRIVER'S LICENSE NO. THURSEM246KL STATE WA EXPIRES 05-13-18 PHOTO ID MATCHED ☒ YES ☐ NO NAME: LAST FIRST MIDDLE SFX CDL ☐ YES ☒ NO

ADDRESS 1304 BRUSKRUD RD IF NEW ADDRESS CITY EVERETT STATE WA ZIP CODE 98208

EMPLOYER DATE OF BIRTH 05-13-76 RACE B SEX M HEIGHT 5'11" WEIGHT 300 EYES BRO HAIR BLK RESIDENTIAL PHONE NO. CELL/PAGER PHONE NO. WORK PHONE NO.

VIOLATION DATE 03/30/2015 14:43 LANG: INTERPRETER NEEDED AT LOCATION SR9 REF. TRAFFICWAY M.P. BLOCK # 100 CITY/COUNTY OF LAKE STEVENS/SNOHOMISH

VEH LIC NO STATE EXPIRES VEH YR MAKE DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND

TR #1 LIC NO STATE EXPIRES TR YR TR #2 LIC NO STATE EXPIRES TR YR MODEL STYLE COLOR

OWNER/COMPANY IF OTHER THAN DRIVER ADDRESS CITY STATE ZIP CODE

ACCIDENT BAC COMMERCIAL VEHICLE YES NO 16+ PASS NO YES HAZMAT YES NO EXEMPT VEHICLE FIRE LEA

1. VIOLATION/STATUTE CODE 46.30.040 DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES ☐ D V FALSIFICATION OF INSURANCE ID CARD

2. VIOLATION/STATUTE CODE ☐ D V

3. VIOLATION/STATUTE CODE ☐ D V

4. VIOLATION/STATUTE CODE ☐ D V

5. VIOLATION/STATUTE CODE ☐ D V

RELATED # DATE ISSUED 03-30-15 MANDATORY APPEARANCE

MANDATORY COURT APPEARANCE APPEARANCE DATE TIME

☐ TICKET SERVED ON VIOLATOR ☒ TICKET REFERRED TO PROSECUTOR

☐ TICKET SENT TO COURT FOR MAILING ☐ BOOKED

CRIMINAL CITATION

You are charged with the crime(s) described on this form. You must respond to the court below.

MARYSVILLE MUNICIPAL COURT 1015 STATE AVE Traffic citations may go on your driving record.

Court Contact Info: MARYSVILLE WA 98270-4301 IF YOU DO NOT APPEAR this may result in a warrant for your arrest and detention in jail. Also, if "Traffic" is checked you may lose your driver's license/privilege.

Phone 1: (360)363-8050

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE. THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER N. ADAMS #127 # 127

One of the following options applies: MANDATORY APPEARANCE

1. If there is a date in the appearance date box you must appear in court at that date and time.
2. If there is a number in the appearance date box you must appear in court within the number of days indicated.
3. If the appearance date box is blank, the court will notify you in writing when to appear. If you do not receive a notice within fifteen (15) days please contact the court immediately.
When you appear, you will be advised of your constitutional rights and the possible penalties if you are convicted.
You also may be asked to enter a plea of NOT GUILTY or GUILTY.

IF RCW LISTED APPEARS BELOW PLEASE READ

RCW 46.61.502 Driving Under the Influence (DUI)
drive a motor vehicle and either: have a 0.08 or higher breath or blood alcohol concentration or THC concentration of 5.00 or higher within 2 hours after driving or be under the influence of or affected by liquor, marijuana, or any drug, or a combination of liquor, marijuana, and any drug.

RCW 46.20.342(1)(a) First Degree Driving While Suspended/Revoked (DWLS)
be an habitual traffic offender and drive a motor vehicle while an order of revocation issued under chapter 46.65 RCW prohibiting such operation is in effect.

RCW 46.20.342(1)(b) Second Degree Driving While Suspended/Revoked (DWLS)
drive a motor vehicle while an order of suspension or revocation prohibiting such operation is in effect, and not be eligible to reinstate the license or driving privilege.

RCW 46.20.342(1)(c) Third Degree Driving While Suspended/Revoked (DWLS)
drive a motor vehicle while the license or privilege to drive is suspended or revoked for (1) failure to furnish proof of satisfactory progress in a required alcoholism or drug treatment program, or (2) failure to furnish proof of financial responsibility pursuant to chapter 46.29 RCW, or (3) failure to comply with chapter 46.29 RCW relating to uninsured accidents, or (4) failure to respond to a notice of traffic infraction, failure to appear at a requested hearing, violation of a written promise to appear in court, or failure to comply with the terms of a notice of traffic infraction or citation, or (5) suspension or revocation in another state that would not result in suspension or revocation in this state; or (6) failure to reinstate the driver's license or privilege after suspension or revocation in the second degree; or (7) the person has a suspension under RCW 46.20.267 relating to intermediate driver's licenses, or any combination of the above.





STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E410009**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	15-00750
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

TRIBAL RESERVATION	
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DATE OF COLLISION	03 - 22 - 2015	TIME (2400)	1506	COUNTY #	31	MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	IN <input checked="" type="checkbox"/> OF	CITY #	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION <input type="checkbox"/>	NON-INTERSECTION <input checked="" type="checkbox"/>		
SR9	BLOCK NO.	100	MILE POST	

DISTANCE		MILES	N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)	
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UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4252326891
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LAST NAME	THURSTON	FIRST NAME	EUGENE	MIDDLE INITIAL	M
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STREET NEW ADDRESS	1304 BRUSKRUD RD APT 1119
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CITY	EVERETT	ST	WA	ZIP	982084179
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	THURSEM246KL	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	05 - 13 - 1976
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	9	RESTR.	9	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	AQC9111	STATE	WA	VIN#	4A4AP3AU6EE026429
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2014	MAKE	mits	MODEL	OUTLAN	STYLE	UT	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. EUGENE THURSTON 20330 BOTHELL EVERETT HWY BOTHELL WA 98012

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	VERN FONK 4383038
VEHICLE LEGALLY STANDINGS YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 3862357545
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LAST NAME	BELLE	FIRST NAME	HUGH	MIDDLE INITIAL	H
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STREET NEW ADDRESS	3783 BIRCH MOUNTAIN RD
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CITY	PORT ORANGE	ST	FL	ZIP	321290000
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CDL	E	RESTRICTIONS	A	ENDORSEMENTS	
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DRIVER'S LICENSE #	B400328772210	STATE	FL	SEX	M	D.O.B.	MMDDYYYY	06 - 21 - 1977
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	9	RESTR.	9	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	PEL7J	STATE	FL	VIN#	1ZVBP8AN2A5136760
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2010	MAKE	FORD	MODEL	MUSTAN	STYLE		VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.

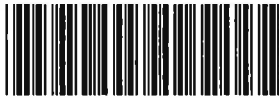
LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO 4337625265/01288
VEHICLE LEGALLY STANDINGS YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	CHARGE



OFFICER'S NAME (PRINT)	N. ADAMS #127	BADGE OR ID #	127	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E410009**

CASE #

15-00750

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY				
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY				
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY				
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES

NARRATIVE

On 03/22/15 at about 1507 hours (all times approximate), I responded to a collision at SR-9 and Market PI in the city of Lake Stevens.

Vehicle 1 (LIC: AQC9111) was traveling southbound in the 100 block of SR9 in the far right lane. Vehicle 1 merged left into the center lane and failed to see Vehicle 2 (LIC: PEL7J) was traveling southbound in that lane. As Vehicle 1 merged left it collided with Vehicle 2.

Neither party claimed an injury. Information was exchanged and the scene was cleared.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

N. ADAMS #127

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

03-22-15 05:54 PM

DATED

PLACE SIGNED

APPROVED BY

SGT. C. VALVICK 71

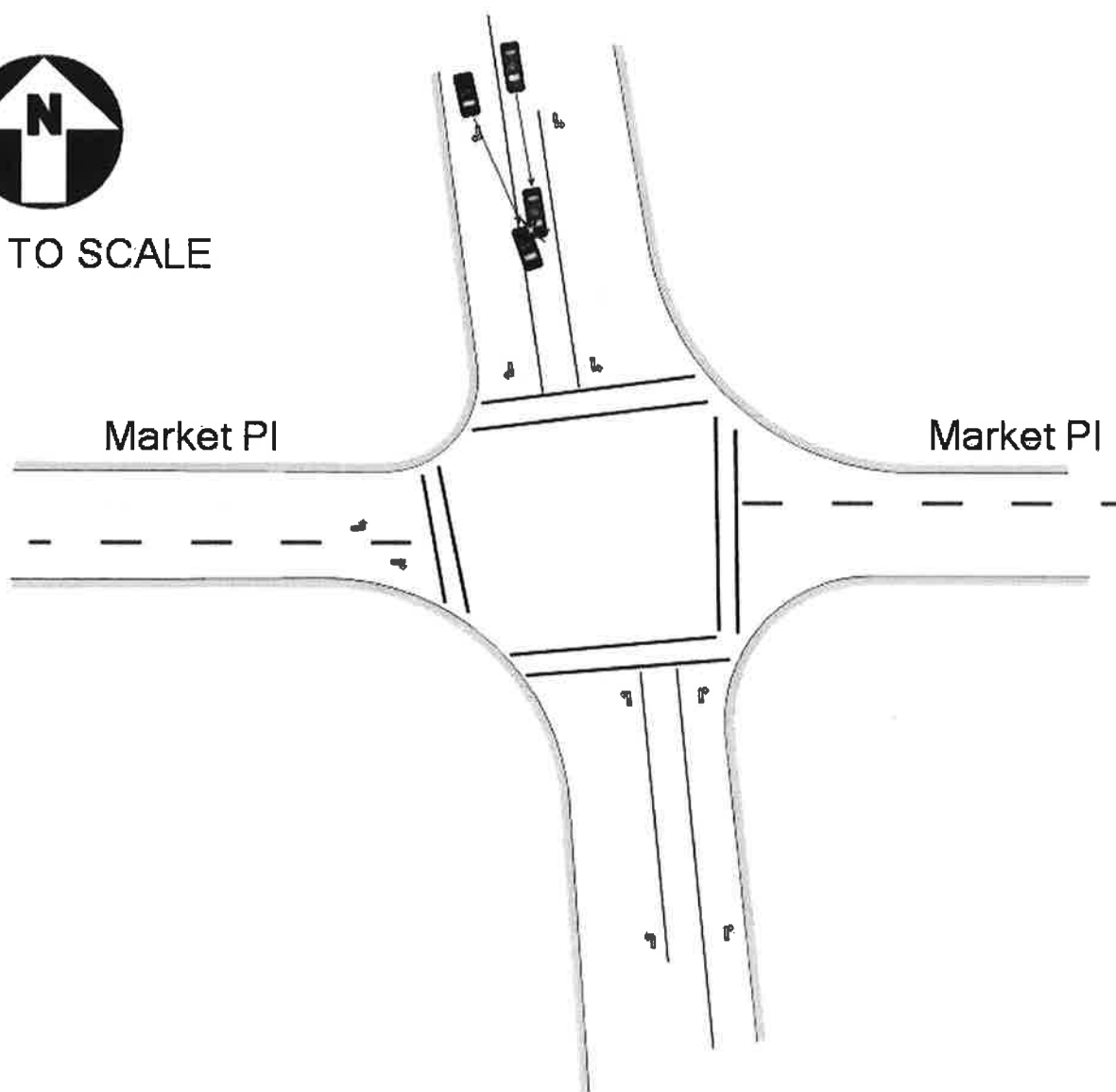
DATE

3/23/2015 10:12:44 AM

BADGE OR ID #	127	ORI #	WA0311900	TIME POLICE DISPATCHED	3:07 PM	TIME POLICE ARRIVED	3:11 PM
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NOT TO SCALE



Incident History for: #SS15005543

Case Numbers: \$SS15000750

Received 03/22/15 15:06:25 BY SPCT06 SP0391
Entered 03/22/15 15:07:10 BY SPCT06 SP0391
Dispatched 03/22/15 15:07:21 BY SPDP17 SP0371
Enroute 03/22/15 15:07:21
Onscene 03/22/15 15:11:08
Closed 03/22/15 15:25:08

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS003 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: SOUT

Src: 9

Loc: MARKET PL/SR 9 NE, LKS (V)

Latitude: (+) 48.003302 Longitude: (-) 122.110677

Loc Info: VERIZON,

Name:

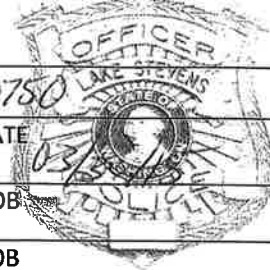
Addr:

Phone: 3862357545

/1507 (SP0391) ENTRY , CC, NOW, NON INJ, UNK IF BLKING, RP'S CELL LOST
CONNECTION , NA OCB
/1507 (SP0371) DISPER 19D3 #SS130 RUTHERFORD, OFCR (RICH)
/1511 \$PREMPT 19D3
/1511 \$DISPOS 19D2 #SS127 ADAMS, OFFICER (NATHAN)
/1511 PREDSP 19D3 19D2
/1522 (SS127) *ASNCAS 19D2 \$SS15000750
/1525 *CLEAR 19D2 D/H
/1525 CLOSE 19D2

FOLLOW-UP / ROUTING SHEET

CASE NUMBER 15-00780



MUST HAVE CITATION NUMBER OR SUSPECT INFO IF FORWARDING TO PROSECUTOR, COURT OR INVESTIGATIONS.		DATE
CITATION #	SUSPECT	DOB
CITATION #	SUSPECT	DOB
CITATION #	SUSPECT	DOB

OFFICER / DETECTIVE REQUEST

<input checked="" type="checkbox"/> ADD DOCUMENTS TO ORIGINAL FILE	<input checked="" type="checkbox"/> NO FURTHER ACTION REQUIRED
<input type="checkbox"/> ADDITIONAL STOLEN OR RECOVERED PROPERTY SHEETS ATTACHED FOR DATA ENTRY	
<input type="checkbox"/> FORWARD FOLLOW-UP (COURT HAS OPEN FILE ON CASE)	<input type="checkbox"/> FORWARD COMPLETED COPY OF CASE
<input checked="" type="checkbox"/> MARYSVILLE COURT	<input type="checkbox"/> SNO CO FELONY DIVISION
<input checked="" type="checkbox"/> CITY PROSECUTOR	<input type="checkbox"/> JUVENILE COURT
<input type="checkbox"/> REVIEW FOR CHARGES	<input type="checkbox"/> CPS/DSHS <input type="checkbox"/> EVERETT <input type="checkbox"/> SKY VALLEY
<input type="checkbox"/> WACIC / NCIC ENTRY RECORDS	
<input type="checkbox"/> WASH STATE LIQUOR CONTROL	
<input type="checkbox"/> OTHER:	
DATE SENT: 3-31-15	BY: CR #80

<input type="checkbox"/> FORWARD ORIGINAL FILE WITH THE FOLLOW-UP TO COURT
<input type="checkbox"/> CITATION JUVENILE REFERRAL ATTACHED
<input type="checkbox"/> SUBJECT REFERRED FOR FELONY CHARGING
DATE SENT:
BY:

<input type="checkbox"/> PROSECUTOR FOLLOW-UP RESPONSE (ATTACH PROSECUTOR REQUEST FORM)
<input type="checkbox"/> INVESTIGATIONS <input type="checkbox"/> ACTIVE
OFFICER ASSIGNED
DUE DATE

CASE CLOSED

<input type="checkbox"/> UNFOUNDED	<input type="checkbox"/> VICTIM REQUEST	<input type="checkbox"/> ARREST MADE SENT TO COURT
<input type="checkbox"/> LACK OF INVESTIGATIVE LEADS	<input type="checkbox"/> LACK OF INVESTIGATIVE RECOURES	<input type="checkbox"/> EXCEPTIONALLY CLEARED

OFFICER / INVESTIGATOR <i>Adams #127</i>	DATE SIGNED <i>03/30/15</i>
SERGEANT APPROVAL <i>LV #1</i>	DATE SIGNED <i>3/30/15</i>

RECORDS DATA ENTRY	ADDITIONAL	PERSONS <input type="checkbox"/>	PROPERTY <input type="checkbox"/>	ARRESTS <input type="checkbox"/>
RECORDS:	DATE:			

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"